3380-1-02282014-1-1

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# LOCAL TELEPHONE COMPANY ANNUAL REPORT

#### OF THE

NAME	Birch Communications, Inc.			
	(Here show in full the exact corporate, firm or individual name of the respondent)			
LOCATED AT	2323 Grand Blvd, Ste 925, Kansas City, MO 64108			
(Here g	we the location, including street and number of the respondent's main business office within the State			
COMPANY#	2739			
	(Here give the APSC-assigned company number)			

#### TO THE

## **ARKANSAS PUBLIC SERVICE COMMISSION**



# **COVERING ALL OPERATIONS**

FOR THE YEAR ENDING DECEMBER 31, 2013

#### **LETTER OF TRANSMITTAL**

in

To:

Arkansas Public Service Commission

Post Office Box Little Rock, Ark	( 400 ansas   72203-040	0	
Submitted herewith is th	ne annual report co	overing the operation of	Birch Communications, Inc.
of Grand Blvd, Ste 925,		for the year ending Decem	ber 31, 2013. This report is submitted
accordance with Section	n 51 of Act 324 of	the 1935 Acts of Arkansas. kamined by me, and I have o	executed the verification given below.
			(Signature)
		<del></del>	President & CEO (Title)
		************	. K.E
		VERIFICATION	
STATE OF COUNTY OF	) ) ss. )		
l, the undersigned,		Vincent Oddo	of the
Birch Communic	cations, Inc.	(Name and Title) , on my oath do say that the	ne following report has
carefully examined the and affairs of said utility knowledge, information,	y direction from the same, and declared in respect to each , and belief; and I at accounts and fig	e the same a complete and on the same a complete and thing in the say that no deduction of the foregones contained in the foregones.	d records of said utility: that I have correct statement of the business g set forth, to the best of my ons were made before stating the bing statements embrace all of the
		1	(Signature)
Subscribed and swom to day of My Commission Expires			(Signature)  (Sign

#### GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

1	Two (2) copies of this report, property filled out and verified shall be filed with the Utility Division of the Arkansas Public Service Commission, Little Rock, Arkansas, on or before the 31st day of March following the close of the calendar year for which the report is made.
2	The word "respondent" in the following inquiries means the person, firm, association or company in whose behalf the report is made.
3	If any schedule does not apply to the respondent, such fact should be shown on the schedule by the words "not applicable."
4	Except in cases where they are especially authorized, cancellations, arbitrary check marks, and the like must not be used either as partial or entire answers to inquiries.
5	Reports should be made out by means which result in a permanent record. The copy in all cases shall be made out in permanent black ink or with permanent black typewriter ribbon. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be shown in red link or enclosed in parentheses.
6	This report will be scanned in. Please bind with clips only.
7	Answers to inquiries contained in the following forms must be complete. No answer will be accepted as satisfactory which attempts by reference to any paper, document, or return of previous years or other reports, other than the present report, to make the paper or document or portion thereof thus referred to a part of the answer without setting it out. Each report must be complete within itself.
8	In cases where the schedules provided in this report do not contain sufficient space or the information called for, or if it is otherwise necessary or desirable, additional statements or schedules may be inserted for the purpose of further explanation of accounts or schedules. They should be legibly made on paper of durable quality and should conform with this form in size of page and width of margin. This also applies to all special or unusual entries not provided for in this form. Where information called for herein is not given, state fully the reason for its omission.
9	Schedules supporting the revenue accounts and furnishing statistics should be so arranged as to effect a division in the operations as to those inside and outside the state.
10	Answers to all inquiries may be in even dollar figures, with cents omitted and with agreeing totals.
11	Each respondent should make its report in duplicate, retaining one copy for its files for reference, in case correspondence with regard to such report becomes necessary. For this reason, several copies of the accompanying forms are sent to each utility company concerned.

Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:				
Name Angela Hoke	Title Manager - Legal & Regulatory			
Address 2323 Grand Blvd, Ste 925, Kansas (	City, MO 64108			
Telephone Number 816-300-1049				
E-Mail angela.hoke@birch.com	<del></del>			
	<del></del>			
Give the name, address, telephone number a	nd e-mail address of the resident agent:			
Name	Telephone Number			
Address	<del></del>			
E-Mail	<del></del>			

7.	for each consolidation or merger, (b) name all constituent and merged companies, and (c) give like particulars as required of the respondent in inquiry No. 5 above:
	(a) NO
	(b)
	(c)
8.	State whether respondent is a reorganized company. If so, give (a) name of original corporation, (b) date of reorganization, (c) reference to the laws under which it was reorganized and (d) state the occasion of the reorganization, whether because of foreclosure of mortgage or otherwise, giving full particulars.
	(a) NO
	(b)
	(c)
	(d)
9.	Was respondent subject to a receivership or other trust at any time during the year?  If so, state:
	(a) Name of receiver or trustee:
	(b) Name of beneficiary or beneficiaries for whom trust was maintained:
	(c) Purpose of the trust:
	(d) Give (1) date of creation of receivership or other trust, and (2) date of acquisition of respondent:  (1) (2)
10.	Did the respondent act in any of the capacities listed in Paragraph (a) below during the past year? No If so,
	(a) Indicate the applicable one by an X in the proper space:
	<ul> <li>( ) Guarantor,</li> <li>( ) Principal—obligor to a guaranty contract.</li> </ul>
	(b) Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.

#### **DIRECTORS**

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (\*) and Secretary (\*\*) marked by asterisks.

Name (Dissele	Office Address	Date of Term		
Name of Director	Office Address	Beginning	End	
Holcombe T. Green	3060 Peachtree St NW Ste 1065, Atla	6/7/05	n/a	
R. Kirby Godsey •	3060 Peachtree St NW Ste 1065, Atla	6/7/05	n/a	
Secretary is not an officer not a direc	tor (see below)**			
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#### PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address		
President	Vincent Oddo	3060 Peachtree St NW Ste 106		
Exec. Vice President	Christopher Aversano	140 Gateway Dr., Ste A., Maco		
Treasurer	Edward James III	140 Gateway Dr., Ste A., Maco		
**Secretary	Christopher Bunce	2323 Grand Blvd, Ste 925, Kar		
Sr. Vice President	Christopher Ramsey	2323 Grand Blvd, Ste 925, Kar		

GROSS ASSESSABLE REVENUES		
Description	Amount	
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	\$704,126	

#### LOCAL EXCHANGE SERVICE STATISTICS

ACCESS LINES	ARKANSAS	
Residence	111	
Business	1,647	
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	1,758	
PBX Access Lines		
Coin or Credit Card Paystation Access Lines		
Company Official Access Lines (Numbers)		
TOTAL ACCESS LINES	1,758	

### STATEMENT OF ACCURACY

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.

**President/General Manager** 

## COMPANY CONTACTS

Company Information			
Company Name Birch Communications, Inc.			
dba			
Official Mailing Address	2323 Grand Blvd, Ste 925, Kansas City, MO 64108		

AREA	PERSON TO CONTACT	PHONE#	FAX#	E-MAIL.
Annual Report	Angela Hoke	(816) 300-1049	(816) 300-1808	angela.hoke@birch.com
Fuel Adjustment Report				
Cost of Debt Report				
Tariffs	Tara Jackson	(816) 300-1677	(816) 300-1808	tara.jackson@birch.com
Accounting	Stephen Spohrer	(816) 300-3352	(816) 300-3350	stephen.spohrer@birch.com
Rates				
Engineering				
Finance	Stephen Spohrer	(816) 300-3352	(816) 300-3350	stephen.spohrer@birch.com
Income Taxes				
Property Taxes				
Gas Supply				
Legal	Tara Jackson	(816) 300-1677	(816) 300-1808	legal@birch.com
Data Processing				

Please list the number of utility employees located in Arkansas